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E D I T O R I A L S[†]

1940

California and Western Medicine extends to every member of the California Medical Association best wishes for a Happy and Prosperous New Year.

PLATFORM OF THE AMERICAN MEDICAL ASSOCIATION

Propaganda: Its Misuse in Medical Practice. "Propaganda," what a word! How widespread its use and influence through recent journalism and radio broadcasts; and how, both in our own country and abroad, are seen only too often its malevolent results! The word itself in its English connotation is quite new, first coming into vogue in 1718 or so, since which time it has been used to describe "a systematic scheme or concerted movement for the propagation of a particular doctrine or practice."

Propaganda in relation to medical practice is comparatively of even more recent growth, few expressions of it occurring up to twenty-five years ago. Since then things have changed, and nonsectarian and scientific medicine have become favorite objects of propaganda attack, at least from certain angles.

Medicine's Five Persecution Years.—It is not surprising, therefore, to record that, at the recent annual meeting of State Association Secretaries and Editors, held in Chicago on November 17 and 18 last, President Rock Sleyster of the American Medical Association should have prefaced some of his remarks by referring to a certain "five years of persecution" to which, within the last decade, scientific and organized medicine have been subjected by governmental and other agencies. Just why medical practice as it exists in America should be annoyed by onslaughts that have gone beyond legitimate criticism, to take on manifestations that seem like persecution, is not clear. Part of the explanation may be found in the fact that most of the leaders in such attacks are salaried laymen, not infrequently identified with so-called social welfare agencies, or with governmental departments directly or indirectly associated with proposed legislation that would radically alter medical practice

[†]Editorials on subjects of scientific and clinical interest, contributed by members of the California Medical Association, are printed in the Editorial Comment column sociation, are which follows.

(and to which changes, because of their menace to the public health, physicians object).

Only during the last several years have members of the medical profession begun to develop a realization, and perhaps what might be termed a class consciousness, that their profession is being systematically subjected to something more than proper criticism—that partakes, in fact, of the nature of little less than intentional persecution.

At the onset, such vicious attacks, often insidiously cloaked, were like sporadic outbreaks to which physicians paid little heed. This indifference may have led enemies of high standards of medical practice to come more into the open with their opposition; inducing physicians, from one end of the country to the other, gradually to sense the nature of impending danger.

So it is not to be wondered at that the great American Medical Association, with its constituent state associations and their component county medical societies, was somewhat tardy in giving battle to the antagonistic elements, whose lay leaders embarked upon a campaign of misrepresentation that had, as a primary object, the destruction of the faith of citizens in the very physicians to whom the United States is indebted for the lowest morbidity and mortality records to be found in any country of the civilized world.

American Medical Association House of Delegates Establishes Principles.—On several occasions during the last few years the House of Delegates of the American Medical Association, as the authoritative mouthpiece of the federacy of constituted state associations and their component county societies, deemed it proper to give publicity to certain fundamental principles having to do with American medical practice. Unfortunately, these actions are scattered through the minutes of the official proceedings, and to that extent are not always readily available to physician-speakers and others who may be called upon to explain the attitude and tenets of scientific and organized medicine in the United States concerning problems such as compulsory sickness insurance.

To make the principles that had been officially espoused more readily accessible, the Trustees of the American Medical Association recently formulated a platform in which the considered actions that had been laid down by the constituted authorities of the Association were outlined in eight explicit and clarifying paragraphs. The American Medical Association platform was publicly announced at the Annual Conference of State Association Secretaries and Editors in Chicago on November 17 last, and since then has been the subject of much press comment.

American Medical Association Platform Should Be Real and Remembered.—California and Western Medicine gave the eight principles the place of honor in the editorial columns of the December Journal, printing also on page 394 of the same issue some comments concerning each.

Members of the California Medical Association who may have failed to read the principles and comments are urged now to do so, and to emphasize their importance, the eight paragraphs in question are again printed:

THE PLATFORM OF THE AMERICAN MEDICAL ASSOCIATION

The American Medical Association advocates:

1. The establishment of an agency of Federal Government, under which shall be coördinated and administered all medical and health functions of the Federal Government, exclusive of those of the Army and Navy.

2. The allotment of such funds as the Congress may make available to any state in actual need for the prevention of disease, the promotion of health and the care of the

sick, on proof of such need.

3. The principle, that the care of the public health and the provision of medical service to the sick is primarily a

local responsibility.

- 4. The development of a mechanism for meeting the needs of expansion of preventive medical services, with local determination of needs and local control of administration.
- 5. The extension of medical care for the indigent, and the medically indigent with local determination of needs and local control of administration.
- 6. In the extension of medical services to all the people, the utmost utilization of qualified medical and hospital facilities already established.
- 7. The continued development of the private practice of medicine, subject to such changes as may be necessary to maintain the quality of medical services and to increase their availability.
- 8. Expansion of public health and medical services consistent with the American system of democracy.

FEDERAL DEPARTMENT OF HEALTH: OFFICIALLY PROPOSED BY THOMAS M. LOGAN, M. D., OF CALIFORNIA IN 1871

Principle I of the American Medical Association Platform Advocates Better Federal Coördination of Public Health Agencies.—Principle I of the Platform of the American Medical Association, states:*

THE PLATFORM OF THE AMERICAN MEDICAL ASSOCIATION

1. The establishment of an agency of Federal Government under which shall be coördinated and administered all medical and health functions of the Federal Government exclusive of those of the Army and Navy.

Comment: Today the medical and health functions of the United States are divided among a multiplicity of departments, bureaus, and federal agencies. Thus, the United States Public Health Service is in the Federal Security Department; the Maternal and Child Welfare Bureaus in the Department of Labor; the Food and Drugs administration in the Department of Agriculture; the Veterans' Administration and many other medical functions are separate bureaus of the government. The WPA, CCC, and PWA are concerned with a similarity of efforts in the field of preventive medicine. The Federal Works Administration and the Federal Housing Administration also have some medical functions.

Since 1875 the American Medical Association has urged the establishment of a single agency in the Federal Government under which all such functions could be correlated in the interest of efficiency, the avoidance of duplication, and a saving of vast sums of money. Such a federal health agency, with a secretary in the cabinet, or a commission of five or seven members, including competent physicians, would be able to administer the medical and health affairs of the Government with far more efficiency than is now done.

^{*} See California and Western Medicine, December, 1939, on page 394.